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APPLICANTS RANDI LYNN SCHINDLER, LOS ANGELES, CA; ** CONTINUING DATA <i>None M.B.</i> ** FOREIGN APPLICATIONS <i>None M.B.</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 09/29/1998				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>MB</i> Examiner's Signature <i>MB</i> Initials		STATE OR COUNTRY CA	SHEETS DRAWING 2	TOTAL CLAIMS 10
		INDEPENDENT CLAIMS 2		
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TITLE PROSTHETIC DEVICE				
FILING FEE RECEIVED 395	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	